

VA St. Louis Health Care System
PGY-1 and PGY-2 Infectious Disease Pharmacy Residency Program
Pharmacy Resident Grievance, Disciplinary Action, & Dismissal Policy

Purpose: To establish policy and procedures related to pharmacy resident grievance resolution, disciplinary and remediation processes, residency certificate awarding, and procedures for dismissal from the program at the VA St. Louis Health Care System.

Policy

Pharmacy Residents are employees of the VA St. Louis Health Care System (with appointment duration of one year) and are therefore subject to all pertinent rules and regulations regarding personnel of the Medical Center, including the policies and procedures of the Pharmacy Service. Furthermore, Pharmacy Residents are subject to the requirements of the Pharmacy Residency Program as described in the Pharmacy Residency Program Handbook.

Pharmacy Residents, preceptors, and pharmacy staff and administrators are expected to act in a professional manner at all times. It is not anticipated that grievance, disciplinary, remediation, or dismissal actions will be needed during the completion of the Residency Program. However, the criteria outlined below describe actions to be taken if formal intervention regarding unacceptable performance, unprofessional behavior, or resident grievance is required.

A. Pharmacy Resident Grievance Process

1. The Residency Advisory Committee encourages the resolution of most problems through face-to-face interactions between the involved parties whenever possible. This is an important aspect of all working relationships. Pharmacy Residents are encouraged to attempt to resolve grievances through this process initially. It is expected that a mutually agreeable solution will be sought by those involved, with appropriate consultation as needed.
2. The Residency Advisory Committee expects those involved in training or working with pharmacy residents to be receptive to reasonable approaches by residents with complaints, feedback, or grievances. It is expected that a mutually agreeable solution will be sought by those involved, with appropriate consultation as needed.
3. If a satisfactory resolution of the complaint or grievance is not achieved between the involved parties, the resident, preceptor, or other involved party should contact the Residency Program Director for consultation and assistance. Assistance could include acting as a mediator for continued discussion, help in selecting an alternative, appropriate mediator, making recommendations regarding an alteration of learning environment or rotational experience, or other appropriate actions.
4. If the conflict remains unresolved after involvement of the Residency Program Director, the resident may submit the complaint, in writing, to the Residency Program Director within 10 days of the final consultative activity. The Residency Program Director will then present the grievance to the Residency Advisory Committee for review within 10 business days of receipt.
 - a. The involved parties of the grievance will be notified of the time, date, and location of the meeting of the Residency Advisory Committee and be allowed time to present information related to the grievance.
 - b. The Residency Advisory Committee will review and discuss the available information regarding the grievance. Formal recommendations regarding the resolution of the grievance and the continuation of the Pharmacy Residents' learning experience will be

determined by the Residency Advisory Committee and distributed in writing to the involved parties.

- c. If the grievance involves any member of the Residency Advisory Committee that member will recuse themselves from the review or discussion of the grievance.
- d. A formal written grievance regarding the Residency Program Director can be submitted directly to the Pharmacy Service Clinical Coordinator for appropriate presentation to the Residency Advisory Committee.
- e. Decisions and recommendations of the Residency Advisory Committee will be final.

B. Disciplinary/Remediation Actions against a Pharmacy Resident

Pharmacy Residents are expected to place the highest priority on the completion of residency requirements, the achievement of residency outcomes, goals and objectives, and the provision of patient care. Furthermore, it is expected that residents will strive to continuously improve their performance and clinical, professional, and educational skills through completion of the program. In accordance with ASHP accreditation requirements, pharmacy residents will be assessed regularly by preceptors, program directors, and other members of the pharmacy and healthcare community. The Residency Program Director is responsible for creating and maintaining a method for assessing and documenting the performance and progress of pharmacy residents that meets the standards of ASHP accreditation. This method shall include a procedure for providing and reviewing written progress reports and evaluations to the residents to facilitate the improvement and development of resident skills and abilities.

If a pharmacy resident fails to show satisfactory progress or performance in any clinical, professional, or educational requirements of the residency program, a variety of actions may be taken by the program director. In general, it is recommended that the following actions be utilized in providing a structured remediation process for pharmacy residents: resident placed on OBSERVATIONAL STATUS, resident placed on PROBATION, resident SUSPENDED, with the potential for a resident to be DISMISSED from the program. Some situations may necessitate a deviation from this standard, and it may not be necessary or proper to move through all levels of the policy for a resident to be placed on probation, to be suspended, or dismissed from the program.

1. OBSERVATIONAL STATUS

Observational status is the first step that may be utilized for structured remediation of a pharmacy resident. If a pharmacy resident's clinical or educational progress and/or performance are found to be unsatisfactory, the Residency Program Director will meet with the resident as soon as possible. Together, the resident and Residency Program Director will outline, in writing, the following: noted areas of insufficiency, a detailed plan for improvement, a plan for reassessment, and the timeframe in which this is to be completed. A copy of the plan will be provided to the resident and placed in the resident's training file by the Residency Program Director. If the pharmacy resident fails to achieve adequate improvement/progress over the specified timeframe, the resident may be placed on probation.

2. PROBATION

- a. A pharmacy resident may be placed on probation if his/her professional, clinical, or educational progress or development is unsatisfactory and continuation of the program or receipt of certificate is at risk. Upon recommendation of the Residency Program Director, if a pharmacy resident fails to meet the standards of progression for the training program, probationary status may be approved by the Residency Advisory Committee.

- b. It is not necessary for a resident to be placed on observational status prior to being placed on probation; a resident may be placed on probation at any time. The assignment of probationary status is not subject to appeal by the resident.
- c. Details of the institution of probationary status and specific reasons for probation implementation will be provided to the resident in writing, with written acknowledgment of receipt requested. In addition to providing written notification, the Residency Program Director must also discuss this decision with the resident at the earliest possible time. Together, the resident and the Residency Program Director will outline, in writing, the following: noted areas of insufficiency, a detailed plan for improvement, a plan for reassessment, and the timeframe in which this is to be completed. The documentation will clearly detail specific performance related areas of concern and/or deficiency.
- d. As noted above, the Residency Program Director shall provide a specific, detailed plan for reassessment. This plan shall include a specific timeline for activities related to remediation and reassessment. In general, at least 30 calendar days will be allowed for the resident to improve their performance related to the specified areas of insufficiency. Probationary status may be assigned for a shorter or longer period with the approval of the Residency Advisory Committee.
- e. At the conclusion of the probationary period, the Residency Program Director will complete a reassessment of the resident regarding the targeted areas for improvement. If the reassessment determines that the resident has not achieved satisfactory progress toward the correction of the identified deficiencies, the resident may be recommended for dismissal from the program as detailed in section “4” below. Dismissal from the program is subject to appeal; appeal of dismissal must follow the procedures as detailed in section “5” below.
- f. If at the specified time of reassessment the Residency Program Director is satisfied with the progress and improvement of the resident in the areas targeted for remediation and any other areas of concern that may have arisen during the probationary period, the improvements will be presented to the Residency Advisory Committee for discussion and review. If the improvements are determined to be satisfactory, the resident will be notified in writing of the repealing of probationary status.

3. SUSPENSION

- a. The Residency Program Director may place a resident on suspension with the approval of the Residency Advisory Committee. Situations that may result in suspension include, but are not limited to: allegation of a serious professional charge against the resident, concern that a resident’s performance has been compromised, or actions by a resident which result (or may result) in an increased risk to patients.
- b. The suspension may be with or without pay, dependent upon the discretion of the Pharmacy Chief of Service. Suspension with pay is not subject to appeal. Suspension without pay is subject to appeal through the process detailed in section “5” below.
- c. Notification of suspension will be provided to the resident in writing, with written acknowledgement of receipt requested. The Residency Program Director and members from the Resident Advisory Committee shall confer with the resident regarding the suspension as soon as practicable.

- d. An investigation of specified concerns, allegations, or actions will be initiated within 5 working days. The investigation team will include the Residency Program Director, 2 other members of the Residency Advisory Committee, and the Pharmacy Service Clinical Coordinator. The determination of reinstatement, with pertinent conditions if applicable, or dismissal of the resident will be made within 30 calendar days. This will allow the investigation team and the Pharmacy Service time to fully evaluate the concerns, allegations, or actions pertinent to the situation and recommend appropriate action.
- e. The suspension period may be extended beyond 30 days with approval of the Pharmacy Chief of Service if more time is needed to complete an appropriate investigation.

4. DISMISSAL

- a. Upon recommendation of the Residency Program Director and the Residency Advisory Committee, a resident shall be dismissed from a pharmacy residency program for unsatisfactory performance or conduct by the Pharmacy Chief of Service. Potential grounds for dismissal include, but are not limited to:
 - i. Illegal, unethical, or unprofessional conduct;
 - ii. Excessive tardiness/absenteeism;
 - iii. Job abandonment (3 or more days absent from program without notice given to the Residency Program Director);
 - iv. Resident performance or actions that results in an increased risk to patients; performance which presents a serious compromise to acceptable standards of patient care or jeopardizes patient welfare.
- b. The recommendation for dismissal shall be submitted to the Pharmacy Chief of Service in writing. This documentation shall detail the specific areas of performance, conduct, or concerns that are the grounds for the dismissal.
- c. Dismissal related to job abandonment will be considered equivalent to resignation and is not subject to appeal. Dismissal related to unsatisfactory performance or conduct is subject to resident appeal as detailed in section "5" below.
- d. The Pharmacy Chief of Service will send written notification of dismissal to the following:
 - a. Pharmacy Resident (certified mail, return receipt requested or hand-delivered with written acknowledgment of receipt/delivery)
 - b. Residency Program Director
 - c. The VA St. Louis Health Care System Human Resources
- e. Upon notification of dismissal, all compensation and benefits of the resident will end, effective the date of notification.
- f. If the dismissal is subject to appeal, appeal must be filed within 5 working days of notification of dismissal as described in section "5" below.

5. RIGHT TO APPEAL DISMISSAL

A pharmacy resident who has been dismissed from a VA St. Louis Health Care System Pharmacy Residency Program shall be afforded the right to appeal dismissal (except when dismissal results from job abandonment; see section 4.a.iii above). Appeal of dismissal will

be handled in a just fashion, being cognizant of rights of the pharmacy resident and the interests of the VA St. Louis Health Care System.

- a. A pharmacy resident wishing to appeal dismissal must submit the appeal, in writing, to the Pharmacy Chief of Service and the Residency Program Director within 5 working days of dismissal notification. If an appeal of dismissal is not submitted within 5 days the option of appeal will be considered waived and will amount to acceptance of dismissal by the resident.
- b. As long as the dismissed pharmacy resident has not depleted their allotted vacation or sick time, salary and/or insurance benefits will continue to be provided during the appeal process. The provision of salary and/or insurance benefits shall not exceed 30 days from time of appeal of dismissal submission.
- c. An ad hoc Residency Dismissal Appeal Committee will be appointed by the Pharmacy Chief of Service and the Residency Program Director. This committee shall consist of a current pharmacy resident, a member of the Residency Advisory Committee, two preceptors of the VA St. Louis Health Care System
- d. Pharmacy Residency Program and the Pharmacy Service Clinical Coordinator.
- e. A time and place for the hearing of the appeal will be set by the Residency Dismissal Appeal Committee. It shall occur at the earliest reasonable date and within 10 days of the time of the submission of appeal.
- f. Documentation pertaining to the contested dismissal will be provided to the appointed Residency Dismissal Appeal Committee members at least 5 business days prior to the dismissal appeal hearing. This documentation shall include all pharmacy residency related evaluations of the dismissed resident, documentation related to resident dismissal, and any other pertinent information including the letter of appeal from the resident. At the resident's request, this information will be made available to the resident for review and/or duplication.
- g. The resident shall be allowed to introduce evidence they believe to be pertinent to the dismissal proceedings during the hearing. Any material the resident wishes to introduce must be provided to the Residency Program Director at least 5 business days prior to the scheduled dismissal appeal hearing for inclusion in materials distributed to the Residency Dismissal Appeal Committee members.
- h. The resident is afforded the right to appear in person with or without retained legal counsel at the dismissal appeal hearing. Failure of the resident to appear before the committee will result in dismissal of the appeal and upholding of the decision to dismiss. Legal counsel shall participate in a strictly advisory role to the resident. The VA St. Louis Health Care System must be notified of the participation of legal counsel at least 5 business days prior to the dismissal appeal hearing. During the hearing, the resident will be offered the opportunity to address the committee, but this is not required.
- i. The VA St. Louis Health Care System shall have legal counsel present during the hearing.
- j. All materials, documentation, and evidence submitted or considered during the dismissal appeal hearing must be related to the reasons for dismissal from program and the resident's appeal.

- k. The Residency Dismissal Appeal Committee will confer and submit their findings and recommendations to the Pharmacy Chief of Service within 7 business days of the hearing. The Pharmacy Chief of Service will, within 7 days, review and disseminate the decision, in writing, to the following: the pharmacy resident (certified mail, return receipt requested, or hand delivered with written acknowledgement of receipt/delivery), the Residency Program Director, and the VA St. Louis Health Care System Human Resources.
- l. All hearings, actions, and documentation related to the dismissal appeal process is considered confidential and shall not be discussed or disseminated outside of activities related to the appeals process as described above. All materials related to the appeals process shall be returned to the Pharmacy Chief of Service at the conclusion of the proceedings. These materials will be maintained as appropriate by the Pharmacy Chief of Service.

This policy/procedure must be completed, in entirety, prior to the pharmacy resident seeking appeal/mediation through any other forum.

C. Awarding of Residency Certificate

1. It is the responsibility of the Residency Program Director, along with the Residency Advisory Committee, to determine if Pharmacy Residents have successfully completed all residency program requirements. In accordance with ASHP accreditation standards, Pharmacy Residents who fail to meet the standards of the program as outlined in the residency handbook will not be issued a certificate. Awarding of a residency certificate will not occur if:
 - a. A resident fails to complete remediation/disciplinary actions
 - b. Has failed to meet the residency program requirements for completion
 - c. Has not completed required evaluation forms (of preceptors, the residency program, or self).
2. At the end of the residency period unfulfilled requirements will be reviewed and discussed by the Residency Advisory Committee. If the committee determines that the insufficiencies are achievable by the resident, an opportunity to complete the requirements under a Without Compensation (WOC) appointment may be offered. All remaining requirements must be completed within 90 days of the end of the original residency period. Any time required by the resident to complete the requirements would not result in compensation (payment or otherwise). If requirements are completed within the specified timeframe to the satisfaction of the Residency Advisory Committee, a residency certificate may then be awarded.